min area, non sum sum and area for any some a sum seed of the sum of the sum

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. AT10004212-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

patent is sought on the i An Adaptive Path Discov			outing Data F	Packets in a Multino	de Network
the specification of which	h is att	ached here	o unless the	following box is cl	necked:
Number	and w	as amende	d on	(if a	PCT International Application applicable).
I hereby state that I ha including the claims, as disclose all information v	amend	ed by any	amendment	(s) referred to abov	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.
Foreign Application(s) and/or C	Claim of F	oreign Priority	•		
I hereby claim foreign priority inventor(s) certificate listed be a filing date before that of the	low and	have also iden	itified below an	y foreign application for	any foreign application(s) for patent or patent or patent or inventor(s) certificate having
COUNTRY	I	APPLICATION	I NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U S.C 119
COONTIC		7111 210711101			YES NO.
					YES: NO
Provisional Application					
	der Title 3	35, United Sta	ites Code Sect	ion 119(e) of any Unite	d States provisional application(s) listed
	APPL	ICATION SERIAL I	NUMBER	FILING DATE	
Ī					
-	2.0				
information as defined in Title application and the national or	37, Code PCT inte	of Federal Rernational filing	egulations, Sec date of this ap	tion 1.56(a) which occu plication:	nowledge the duty to disclose material rred between the filing date of the prior
APPLICATION SERIAL NUMBER		FILING DATE		STATUS (patented/pending/abandoned)	
		-81			
POWER OF ATTORNEY: As a named inventor, I here business in the Patent and Tra Customer N	ademark C	Office connect	ng attorney(s) ed therewith:	and/or agent(s) to pros Place Customer Number Bar Code Label here	secute this application and transact all
Send Correspondence to:				Direct Telepho	one Calls To:
AGILENT TECHNOLOGIES Legal Department, DL429	, INC.			Michael H. Jest	er
Intellectual Property Admi	nistration			(619) 231-909(1
P.O. Box 7599 Loveland, Colorado 80537	7-0599			(0.0) 20 (000	
I hereby declare that al	l staten	ef are belie	eved to be t	rue: and further th	are true and that all statements at these statements were made
with the knowledge th	hat will under :	lful false s Section 10	tatements a 01 of Title 1	and the like so m I8 of the United St	ade are punishable by fine of ates Code and that such willfu
Full Name of Inventor: Brian	n E. Len	noff		Citizenship: U	SA
Residence: 48	44 Tam	my Court, I	Union City, (CA 94043	
Post Office Address: 35	00 Deer	Creek Roa	d, Palo Alto	CA 94304	
Bourn Inventor's Signature	enit,	W			30/01

Rev 5/01 (DecPwr)

(Use Page Two For Additional Inventor(s) Signature(s))

Page 1 of 1

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. AT10004212-1

Full Name of # 2 joint inventor	Jonathan P. R.	Lacey	Citizenship: <u>Australia</u>
Residence:	1071 Noel Drive	Apt 2 22	2 HOUGHTON STREET
Post Office Address:	Menlo Park, CA	94025-3891	MOUNTAIN VIEW CA 94041-1318
Inventor's Signature		Date	
j.			
Full Name of # 3 joint inventor	:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
		24.0	
Full Name of # 4 joint inventor	:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 5 joint inventor	r:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	······································
Full Name of # 6 joint inventor	.		Citizenship:
Residence: Post Office Address:			
Post Office Address.			
Inventor's Signature		Date	
Full Name of # 7 joint inventor	r:		Citizenship:
Residence:			
Post Office Address:	· · · · · · · · · · · · · · · · · · ·		
Inventor's Signature		Date	
Full Name of # 8 joint invento	r :		Citizenship:
Residence:			
Post Office Address:			
. 101 011100 FREE 1000.			
Inventor's Signature		Date	